BRUSHRESOURCES

A Brush Engineered Materials Inc. Company

Brush Resources Inc P.O. Box 815 Delta, UT 84624 Tel: 435-864-2701 Fax: 435-864-4004

February 14, 2006 Division of Solid and Hazardous Waste Attn. Mr. Dennis R. Downs, Director P.O. Box 144880 Salt Lake City, UT 84114—4880 RECEIVED

UTAH DIVISION OF SOLID & HAZARDOUS WASTE

Certified: 7004 1160 0007 4540 3558

RE: Solid Waste Landfill Annual Report

Dear Mr. Downs,

Enclosed are two copies of the Solid Waste Landfill Annual Report for Brush Resources Inc. Mine and Mill. If you have any questions or comments, please contact me @ (435) 864-2701.

Sincerely,

Alex Boulton, President Brush Resources Inc.

cc: jbr

Legal Files



Mail to: Dennis R. Downs, Director Division of Solid and Hazardous Waste P.O. Box 144880 Salt Lake City, Utah 84114-4880 FEB 17 2006 UTAH DIVISION OF SOLID & HAZARDOUS WASTE

2006 SOLID WASTE LANDFILL ANNUAL REPORT

For Calendar year 2005 or most recent fiscal year

Administrative Information

| Facility 1 | Name: <u>Brush</u> Reso | urces Inc | - Mill | |
|------------------|--------------------------------|------------------------|---------------------------------|--|
| Facility 1 | Mailing Address: | P.O. Box 815 |) | |
| | | (Number & Street, Bo | ox and/or Route) | |
| C | City: <u>Delta</u> | _, State: <u>UT</u> | Zip Code: | 84624 |
| C | County: Millard | · | | ······································ |
| Contact's | Name: Alex Boul | ton | Phone No.:(435 |) 864-2701 |
| | President | | | · - |
| Contact's | Mailing Address: | P.O. Box 815 | Delta, UT 84624 | |
| Contact's | Email Address: | | | |
| | | | | |
| Owner | | | | |
| N | ame: Brush Reso | urces Inc. | Phone No.:(435 |) 864-2701 |
| N | failing Address: P. | O. Box 815 | | 7 004-2701 |
| | | (Number & Street, Bo | x and/or Route) | |
| C | ity: <u>Delta</u> | _, State: <u>UT</u> | Zip Code:_ <u>84</u> | 624 |
| | | | | |
| Operator | (Complete this section only if | the operator is not an | employee of the Owner shown air | ove) |
| N | ame: | | Phone No.:(|) |
| M | lailing Address: | | x and/or Route) | <u> </u> |
| _ | | (Number & Street, Bo | x and/or Route) | |
| C | ity: | _, State: | Zip Code: | |
| Facility Type ar | | | ı | |
| 3 - 31 | | | | |
| [- | Class I | X Class IIIb | ∏ Cla | ss V |
| | Class II | Class IVa | □ Cla | ss VI |
| F | Class IIIa | Class IVa | 0 | |
| Does the fa | | | C/D) cell as part of the per | mit (not operated under a |
| separate pe | rmit number)? Yes | ···· | No _X | ` ' |
| If facility | was permanently cle | osed during the | year enter date closed | l: <u>N/A</u> |
| | - | _ | | |
| | | | | |
| Annual Disposa | l | | | |
| • | | | | |
| Total faci | lity tons: 11 | | or cubic yards: | |
| If separat | e tonnages are avail | lable | | |
| | l tons: N/A | | or cubic yards: | |
| C/D tons: | | | or cubic yards: | |
| Industrial | | | or cubic yards: | |
| maustrai | totta. | | or enote yards | |

| Conversion Factor used | The figure of the second secon |
|--|--|
| No conversion factors used Conversion factor from rules (R315-302-2(4)(c)) used Site specific conversion used Please list: | - |
| Tons Recycled: N/A Cubic Yards Recycled: N/A | tala yan |
| Financial Assurance | |
| Current Closure Cost Estimate: As per Permit | |
| Current Financial Assurance Mechanism: (ie. Bond, Trust Fund, Corporate or government Test etc.) Financial Assurance Mechanism Holder: (ie. Name of Bond Company, Bank etc If PTIF Account give account number) Current Amount or Balance in Mechanism: | |
| Other Required Reports | |
| Financial Assurance: Each facility must recalculate the cost of closure and post-closure inflation and design changes each year. The recalculation, along with proof that the refully covered by the assurance mechanism currently be utilized, must be submitted. It a trust account should include a copy of the most recent account statement. Note Facilities using "Local Government Financial Test" must provide the inform R315-309-3(7)(d) each year. | new cost estimates are Facilities that are using |
| Ground Water Monitoring: Each facility that is required to monitor ground water mu water monitoring report that contains water elevations, sampling results, and statistical box if facility is exempt from ground water monitoring X | |
| Explosive Gas Monitoring: A gas monitoring report must be included unless the facility that has receive an exemption, a Class III, IV, or VI landfill, or any other facility that Check box if facility is exempt from gas monitoring X | |
| Training Report: A report of all training programs or procedures completed by facility year. Signature: Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)). | 14/06 anve. A duly authorized |
| Print name: Alex Boulton Title: Presiden | <u></u> |